## S

	HEDULE B (FEC Form 3) MIZED DISBURSEMENTS	Use separate scl for each categor Detailed Summar	nedule(s) y of the	FOR LINE NUMBER: (check only one)    X   17
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Friends of Jim Clyburn				
\. <i>!</i>	ull Name (Last, First, Middle Initial) Angerholzer Broz Consulting, LLC lailing Address 499 S Capitol St SW			Date of Disbursement  10 20 2015
V P	Suite 422 ity State Vashington DC urpose of Disbursement Travel Expenses andidate Name  Office Sought: House Disbursement For		Category/ Type	Amount of Each Disbursement this Period  82.36  Transaction ID: D531534
	Senate Primary President Other (s tate: District:  ull Name (Last, First, Middle Initial)			
3. l	Uber Mailing Address 1455 Market Street			Date of Disbursement  M M M ZO ZO ZO15
P	ity State San Francisco CA urpose of Disbursement Travel Expenses andidate Name	Zip Code 94103	Category/	Amount of Each Disbursement this Period 71.36 Transaction ID : D531544
	ffice Sought:    House   Disbursement For     Senate   Primary     President   Other (state:	General	Туре	[MEMO ITEM]
Full Name (Last, First, Middle Initial)  Angerholzer Broz Consulting, LLC  Mailing Address 499 S Capitol St SW Suite 422				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
V P	•	p Code 00003-4013	Category/	Amount of Each Disbursement this Period 90.26  Transaction ID: D531536
	ffice Sought:    House   Disbursement For     Senate   Primary     President   Other (s	General	Type	
SUBTOTAL of Disbursements This Page (optional)				

TOTAL This Period (last page this line number only).....